

**NESSAH HEBREW ACADEMY
PRESCHOOL SUMMER CAMP
REGISTRATION AND TUITION AGREEMENT**

Child's First name _____ Last name _____

Birthdate _____ Age _____ Male Female

Allergies _____

Home address _____ Zip _____

Home phone _____

Father's Full Name _____ Mobile # _____

Email- _____

Mother's Full Name _____ Mobile # _____

Email - _____

- Summer tuition will be paid in full upon registering your child
- Return this completed agreement to Nessah Office with check **or** credit card information
- There will be a \$10/ charge for before or after camp hours(8:30-9:00am,3:00-3:30pm)
- There will be a \$35 additional charge for all returned checks

I/We agree to hold harmless, the school, its agents and employees from all claims, damages or other liabilities for injuries to my/our child(ren) which are not the result of gross negligence by this school, its agents or employees. The undersigned also agrees to indemnify the school for damages by my child.

I/ We are enrolling my child for the program above. I/ We have read the registration-tuition agreement. I understand and accept this agreement.

Parent Name _____ Signature _____

Relationship _____ Date _____

**JUNE 29–AUGUST 10, 2018
9:00AM– 3:00PM, FRIDAYS 9:00-2:00PM (\$1350 FOR SIX WEEKS)
NON-REFUNDABLE REGISTRATION \$50(\$260 A WEEK, 3 WEEKS MIN)**